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Bib Data Sheet

SERIAL NUMBER 09/922,827	FILING DATE 08/06/2001 RULE	CLASS 705	GROUP ART UNIT 2166	ATTORNEY DOCKET NO. 32262.
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**APPLICANTS**John B. Boden, Lighthouse Point, FL; *[Signature]***\*\* CONTINUING DATA \*\*\*\*\***THIS APPLN CLAIMS BENEFIT OF 60/223,140 08/07/2000 *[Signature]***\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ..**

\*\* 09/13/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i>		
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
FL	40	40	8

**ADDRESS**

John M. Del Vecchio  
 Hodgson Russ LLP  
 One M&T Plaza, Suite 2000  
 Buffalo , NY 14203-2391 *[Signature]*

**TITLE**System, method, and computer program product for assisting caregivers *[Signature]*

FILING FEE RECEIVED 735	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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